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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No.	LMORIN1260-1		
Client Matter Number	101752-165027		
First Inventor or Application Identifier:	JOHN TERRELL RICKARD		
Title:	SYSTEM AND METHOD FOR THE DEFENSE OF AIRCRAFT AGAINST MISSILE ATTACK		
Express Mail Label No.:	EV 318 740 969 US		
Application Elements (See MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO: Commissioner For Patents BOX PATENT APPLICATION P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, & duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix)		
2. <input type="checkbox"/> Applicant claims small entity status	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. <input checked="" type="checkbox"/> Specification [Total Pages <u>34</u>] (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)		
• Descriptive title of the Invention	b. <input type="checkbox"/> Specification Sequence Listing on:		
• Cross References to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		
• Statement Regarding Fed sponsored R&D	ii. <input type="checkbox"/> paper		
• Background of the Invention	c. <input type="checkbox"/> Statement verifying identity of above copies		
• Brief Summary of the Invention	ACCOMPANYING APPLICATION PARTS		
• Brief Description of the Drawings (if filed)	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
• Detailed Description	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power Of Attorney		
• Claim(s)	(when there is an assignee)		
• Abstract of the Disclosure	11. <input type="checkbox"/> English Translation Document (if applicable)		
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets <u>10</u>]	12. <input type="checkbox"/> Information Disclosure Statement (IDS/PTO 1449) <input type="checkbox"/> Copies of IDS Citations		
5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>2</u>]	13. <input type="checkbox"/> Preliminary Amendment (9 pgs.)		
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	16. <input checked="" type="checkbox"/> Express Mail Certification		
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	17. <input type="checkbox"/> Request And Certification under 35 USC 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent		
18. <input checked="" type="checkbox"/> OTHER: Check #552760 in the amount of \$1812.00			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-In-Part of prior application no.: _____ Prior application information: Examiner: _____ Group/Art Unit: _____			
18. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number (25548) Or Bar Code Label			
OR			
<input type="checkbox"/> Correspondence Address Below			
NAME	ATTN: Mark M. Takahashi GRAY CARY WARE & FREIDENRICH		
ADDRESS	4365 Executive Drive, Suite 1100 San Diego, CA 92121-2133		
Direct Telephone: 858/638-6748 Patent Group Fax No.: 858/638-6727			
Name (print/type)	MARK M. TAKAHASHI	Registration No.: (Attorney/Agent)	38,631
Signature		Date	JAN. 27, 2004

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FEE TRANSMITTAL

Attorney Docket No.	LMORIN1260-1
First Named Inventor:	JOHN TERRELL RICKARD
Application Number	Unknown
Filing Date:	Herewith
Examiner Name:	Unknown
Group/Art Unit:	Unknown

TOTAL AMOUNT OF PAYMENT:	\$1812.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-2258 Deposit Account Name: GRAY CARY WARE & FREIDENRICH <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 770.00	\$385.00	\$770.00
Total Claims	54 - 20 =	34	X \$ 18.00	X \$ 9.00	\$612.00
Independent Claims	8 - 3 =	5	X \$ 86.00	X \$ 43.00	\$430.00
Multiple Dependent Claim(s) (if applicable)			\$ 290.00	\$145.00	\$0.00
Total of above Calculations =					\$1812.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$340.00	\$170.00	\$ 000.00
Reissue filing fee	\$770.00	\$385.00	\$ 0.00
Provisional filing fee	\$160.00	\$80.00	\$ 0.00
Total of above Calculations =			\$

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$1812.00

Name (print/type)	MARK M. TAKAHASHI	Registration No.: (Attorney/Agent)	38,631
Signature		Date	JAN. 27, 2004

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DATE OF DEPOSIT: January 27, 2004

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Robert Wickman

Name



Signature

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